APPLICATION I

SUBMIT COMPLETED ORIGINAL APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County Zoning Department P.O. Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

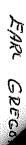
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APR 18 2011 D

INSTRUCTIONS: No permits will be issued until all fees are paid. Bayfield Co. Zoning Dept. Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

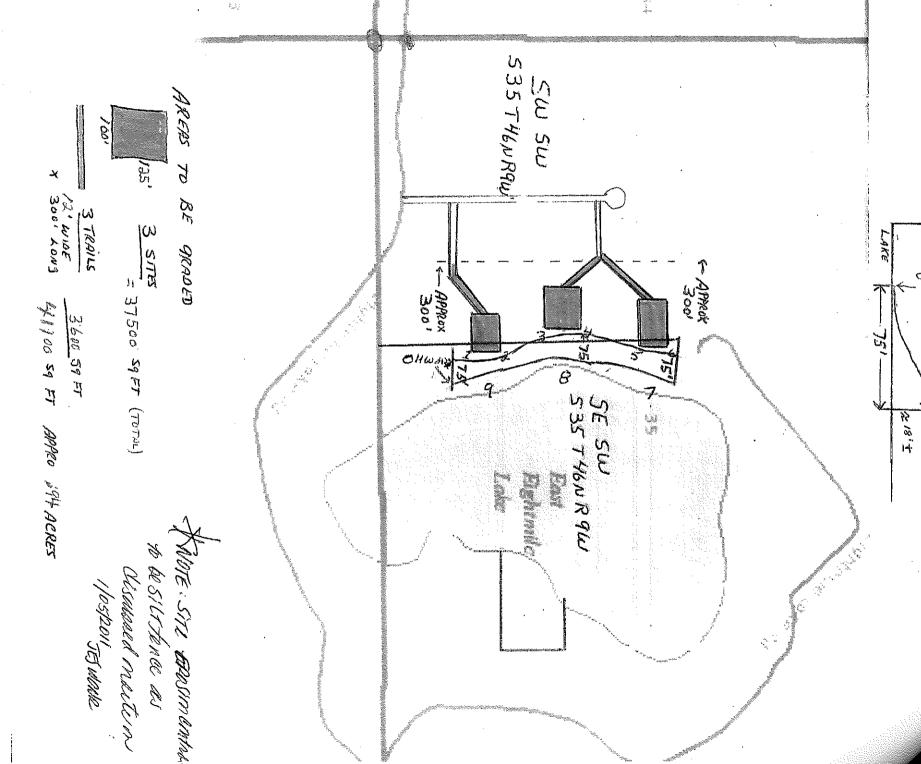
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Date of Approval	IN KUME J MAN	Signed
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Variance (B.O.A.) #	Variance	V Mitigation Plan Required: Yes □ No 赵,
4-26-11	Date of Inspection	of lake By M. Fur
in 75 of Other	Allo gading within	Inspection Record: Metall requirements.
		on for Denial:
	ber Date -0133 Permit Denied (Date)	Permit Issued: State Sanifary Number $326-11$ Permit Number $11-12$
ou recently purchased the property tach a Copy of <u>Recorded</u> Deed)	PLEASE COMPLETE REVERSE SIDE At	* See Notice on Back APPLICANT PLEASE
Copy of Tax Statement orV	River, W 1 54841	Address to send permit Y.O. DOX 31, LOW KINER
C/- h		Lings
on by Bayneld County in determining whether providing in or with this application. I (we) sonable time for the purpose of inspection. $(1-1) \le -11$	on I (we) am (are) providing and that it will be relied up nunty relying on this information I (we) am (are) poess to the above described property at any reas	the detail and thich may be stering county
ESULT IN PENALTIES tge and belief it is true, correct and complete. I	RUCTION WITHOUT A PERMIT WILL RE mined by me (us) and to the best of my (our) knowled	FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief
	☐ External Improvements to Accessory Building	☐ Residential Other (explain)
xplain)	☐ External Improvements to Principal Building (explain)	☐ Residential Accessory Building (explain)
Shortland grading	— 🔊 Special/Conditional Use (explain)	☐ Residential Addition / Alteration (explain)
10	☐ Commercial Other (explain)	
lition (explain)	☐ Commercial Accessory Building Addition (explain)	Deck sq. ft. Deck(2) sq. ft Deck(2) sq. ft Deck(2) sq. ft Deck sq. ft.
plain)	☐ Commercial Accessory Building (exolain)	sq. ft.
ion (explain)	☐ Commercial Principal Building Addition (explain)	□ 养 Residence w/deck-porch (# of bedrooms)
	☐ Commercial Principal Building	Residence sq. ft
Wone	Type of Septic/Sanitary System ☐ Mobile Home (manufactured date)	□
Privy City	Sanitary: New Existing	Structure: New Addition Existing Fair Market Value Square Footage
75' ¼ 75' to 40' ☐ less than 40 ☐	m Shoreline:	ucture in a Shoreland Zone? Yes X
No KD		Teléphone 795-2318 (Home) (Work)
(Phone)	Authorized Agent	Barnes, WI 54873
	Plumber	erty XXX
(Phone)	Contractor Self	Gregoire
00 - 2	004-2-46-09-35-5	939 Page 735 of Deeds Pa
Acreage37,86	CSM#	Gov't LotLotBlockSubdivision
West. Town of BRINES	Township 46 North, Range 9	Legal Description $\frac{5U}{1/4}$ of $\frac{5U}{1/4}$ of Section $\frac{35}{1/4}$ To
B.O.A. OTHER	SPECIAL USE 🔇	LAND USE SANITARY PRIVY CONDITIONAL USE C
ENERGY OF THE HAVE BURNESS HERE HERE HAVE AND THE HOUSE SHEET.		Changes in plans must be approved by the Zoning Department.



REVISEO





Condition: 200 Mitigation Plan Required: Board downer. Signed tustos Date of Inspection 4-26-1 Variance (B.O.A.) # 477-11 Date of Approval